

P06 4907773

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL

(See Reverse)

SENT TO				Irving Sidell			
STREET AND NO.				2955 11 th Ave SW			
P.O., STATE AND ZIP CODE				Seattle 98134			
POSTAGE				\$			
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE			€			
	OPTIONAL SERVICES	SPECIAL DELIVERY			€		
		RESTRICTED DELIVERY			€		
		RETURN RECEIPT SERVICE	SHOW TO WHOM AND DATE DELIVERED			€	
			SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY			€	
			SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY			€	
	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY			€			
TOTAL POSTAGE AND FEES				\$			
POSTMARK OR DATE							
Pertridge Lab Ans Notice							

**STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)**

1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, **leaving the receipt attached**, and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified-mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in Item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address, and ZIP Code in the space below.

- Complete items 1, 2, and 3 on the reverse.
- Attach to front of article if space permits. Otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



**RETURN
TO**



U.S. ENVIRONMENTAL PROTECTION AGENCY
PESTICIDES BRANCH
1200 SIXTH AVENUE M/S 524
SEATTLE, WA 98101

- SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).

- ☒ Show to whom and date delivered.¢
☐ Show to whom, date, and address of delivery.¢
☐ RESTRICTED DELIVERY
 Show to whom and date delivered.¢
☐ RESTRICTED DELIVERY.
 Show to whom, date, and address of delivery. \$
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:

Irving Sidell / Sea. Iron & Metal Works
 2955 11th Ave SW
 Seattle 98134

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	4907773	

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

Irving Sidell

DATE OF DELIVERY

JAN 25 1982

POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE:

CLERK'S
INITIALS

M/S 524

Certified MailLaboratory Analysis Notice

Irving Sidell
Operations Manager
Seattle Iron and Metals Corporation
2955 11th Avenue SW
Seattle, Washington 98134

Dear Mr. Sidell:

On December 4, 1981, samples were obtained as part of an inspection at Seattle Iron and Metals Corporation, Seattle, Washington. These samples have been analyzed for polychlorinated biphenyl (PCB) by the Environmental Protection Agency analytical laboratory. A copy of that lab report is being forwarded to you with this letter.

The analysis involves testing of the sample for seven characteristic and distinct types of PCB. They are: Aroclor 1221, 1232, 1242, 1248, 1254, 1260 and 1016. Only the types of Aroclor found will be reported. No PCBs were detected at the 1 ppm level in the samples collected during the December 4, 1981, inspection.

Inquiries or correspondence should be directed to Jim Everts, EPA Region 10, Permits and Compliance Branch, M/S 524, 1200 Sixth Avenue, Seattle, Washington 98101; telephone: (206) 442-1090.

Donald A. Donaldson, Chief
Compliance Section

Date

Jan 21, 82

Enclosure

Partridge/ck 1-2082 0636P			CONCURRENCES					
SYMBOL	MWP	CE						
SJNAME	Partridge	Everts						
DATE	1/20	1/20						